Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

	20	CLAIMS AS	FILED - (Column		(Colu	mn 2)	SMA TYP		NTITY	OR	OTHER SMALL	
TOTAL CLAIMS			50				R/	ATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			50 minus 20=		* 30		X	S 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =		* /		X	42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+1	40=		OR	+280=	
\star If the difference in column 1 is less than zero,				ro, ente	r "0" in c	olumn 2	TC	TAL		OR	TOTAL	
CLAIMS AS A (Column 1)			MENDED - PAR' (Colum				SN	IALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A	*	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA	. R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	(OR	X\$18=		
	Independent	*	Minus	***		=	X4	12=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM						+280=	
								TOTAL		OR	TOTAL	
		(0-1 4)		(0.1	0)	(0.1		T. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colu		(Column 3)			ADDI	1	-	4554
AMENDMENT B		REMAINING AFTER AMENDMENT			IBER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	ì
	Independent	*	Minus	***		=	X	2=		OR	X84=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		+1-	40=		OR	+280=	
								OTAL T. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	۸۵۵۱				A0011.1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R/A	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=-	X4	2=			X84=	
Ľ	FIRST PRESE	ULTIPLE DEI	TIPLE DEPENDENT (CLAIM				OR		· · · · · · · · · · · · · · · · · · ·	
*	If the intry in colu	mn 1 is less than t	ne entry in colu	mn 2 write	e "O" in co	lumn 3		10=		OR	+280=	
**	If the "Highest Nu	mber Previously Particular of the Previously Particular Previously	aid For" IN THI	S SPACE	is less tha	n 20, nter "20."	ADDI	OTAL FEE		OR	TOTAL ADDIT. FEE	
		nber Previously Pa					r found in	the ap	propriate box	in co	lumn 1.	:

NOTICE OF FEE DUE

DATE:	(1)-12.0		
TO:	Olpe		11002
FROM:	Office of Initial Patent Examir	nation	,,
SUBJECT:	Fee Due		,
APPLICAT	TION NUMBER: / O C	38964	· ·
Office for the authorization	for the attached document sub- ne following reason. Please che n to charge a deposit account. ppropriate fee. If an authorizat siency.	eck the applicati If an authorizati	on for the appropriate on is present, please
☐ Insuffici	ent fee by check		
10 Insuffici	ent funds in deposit account		
□ Declined	l credit card		
□ Non auth	norization for charge to deposit	account	
□ No fee su	ıbmitted per requirement 🕏		
	\	٠,	
The correct	fee code:	amount	\$
The suspend	led fee code: 197	amount	- \$
Fee Due		amount	=\$
If you have a Eleanor Kurt	ny questions, please contact Cy z at 703-308-3642.	nthia Streater at	t 703-306-5430 or

Terminal Operator V BLUND